

AMENDMENT TRANSMITTAL LETTER			Docket No. MED-032C4		
Application No. 10/606,409	Filing Date June 25, 2003	Examiner A. R. Reimers	Art Unit 3733		
Applicant(s): Samuel M. Shaolian					
Invention: TRANSPEDICULAR INTERVERTEBRAL DISC ACCESS METHODS AND DEVICES					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	19	- 20 =	0	x 50.00	0.00
Independent Claims	5	- 3 =	2	x 200.00	400.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					400.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>07-1700</u> in the amount of \$ <u>400.00</u> . A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>07-1700</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
/Eleanor M. Hynes/ Eleanor M. Hynes Attorney/Agent Reg. No.: 58,013 GOODWIN PROCTER LLP 901 New York Avenue, NW Washington, DC 20001 (202) 346-4000			Dated: <u>August 27, 2007</u>		